Filli	in this information to identify your	case:	10000000000000000000000000000000000000		:				
	otor 1 Leonard M								
	otor 2 use, if filing)			144				,	
Unit	ted States Bankruptcy Court for th	ne: DISTRICT OF NEW J	ERSEY			÷			
Cas	se number 20-18767		*		Check if this is:				
(lf kn	own)		·		🖾 An amended filing				
	· ·				☐ A suppleme 13 income a		g postpetition of	chapter	
Of	fficial Form 106l				MM / DD/ Y		g		
	chedule I: Your Inc	come			ו זענט ז ואוואו	111		12/15	
sup spoi	as complete and accurate as populations of plying correct information. If you are separated and you a separate sheet to this form Describe Employmen	ou are married and not filing won the spouse is not filing won. On the top of any additi	ng jointly, and your s ith you, do not includ	spouse is living de information a	with you, incluiout your spo	ide infori use. If m	nation about y ore space is r	your leeded,	
1.	Fill in your employment			e e e					
	information.		Debtor 1		Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed			Employed			
		. *	☐ Not employed	□ Not er	☐ Not employed				
	Include part-time, seasonal, or	Occupation							
	self-employed work.	Employer's name	Achieve 3000	Student	Student Transportation of America				
	Occupation may include studer or homemaker, if it applies.	Employer's address 331 Newman Springs Road Suite 304 Red Bank, NJ 07701			d 3349 Highway 138 Bldg A Suite C Belmar, NJ 07719				
		How long employed t	here?						
Par	t 2: Give Details About M	lonthly income							
Esti spot	mate monthly income as of the use unless you are separated. u or your non-filing spouse have	date you file this form. If					-		
more	e space, attach a separate sheet	to this form.					•		
				Fo	r Debtor 1		btor 2 or ing spouse		
2.	List monthly gross wages, sa deductions). If not paid monthly			2. \$	3,799.19	\$	4,413.98		
3.	3. Estimate and list monthly overtime pay.			3. +\$	0.00	+\$	0.00		
4.	Calculate gross Income. Add	line 2 + line 3.		4. \$	3,799.19	\$	4,413.98		
			•						

	Сору	/ line 4 here	4.	2,000,000,000	Debtor 1 3,799.19	For Debto non-filing \$		
5.	lieta	all payroll deductions:			0,1.0011.0		1,710.00	-
٥.			_					
	5а.	Tax, Medicare, and Social Security deductions	5a.	\$	569.01	\$	631.41	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	265.94	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d.	\$	92.27	\$	0.00	_
	5e.	Insurance	5e.	\$	47.11	\$	624.54	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	•
	. 5g.	Union dues	5g.	\$	0.00	\$	0.00	_
	5h.	Other deductions. Specify: Flex Spending Account	5h.+	·	90.26	+ \$	120.34	
		NJ Transit	_	\$	5.87	\$	0.00	_
		Life	_	\$	13.06	\$	0.00	
		Vol Plan DI		\$	0.00	\$	11.48	_
		Vol Life Child	_	\$	0.00	\$	1.00	-
		Vol Life EE	_	\$	0.00	\$	8.30	
		Vol Life Sp		\$	0.00	\$	4.16	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,083.52	\$	1,401.23	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,715.67	\$;	3,012.75	
8.	8b. 8c. 8d. 8e. 8f.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8a. 8b. 8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	
	8g.	Pension or retirement income	- 8g.	\$	0.00	\$	0.00	,
	8h.	Other monthly income. Specify: Proportionate 2019 Tax Refund	_ 8h.+	\$	53.50	+ \$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	53.50	\$	0.00	
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_	2	.,769.17 + \$	3,012.75	= \$	5,781.92
11.	other	all other regular contributions to the expenses that you list in Schedule le contributions from an unmarried partner, members of your household, your of friends or relatives. It include any amounts already included in lines 2-10 or amounts that are not a lifty:	depend			ed in <i>Schedul</i>	e J. +\$	0.00
12.	Add t Write applie	the amount in the last column of line 10 to the amount in line 11. The resulthat amount on the Summary of Schedules and Statistical Summary of Certaines	ult is the Liabili	e comi ities ar	oined monthly in nd Related <i>Data,</i>	come. if it 12.	\$	5,781.92
10	Dave						Combin	ed income
13.	no yo	ou expect an increase or decrease within the year after you file this form? No.					•	
		Yes. Explain:						

Case number (if known)

20-18767

Debtor 1 Leonard M Oglesby